

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION                  | INITIALS | ID NO. | DATE    |
|---------------------------|----------|--------|---------|
| FEE DETERMINATION         |          |        |         |
| O.I.P.E. CLASSIFIER       | <i>h</i> | 45     | 1/21/01 |
| FORMALITY REVIEW          |          |        |         |
| RESPONSE FORMALITY REVIEW | <i>h</i> |        | 2-7-01  |

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)..... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

| Claim          | Date      |
|----------------|-----------|
| Final Original |           |
| 1              | 1-3-19-03 |
| 2              | 2-8-1-03  |
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| Claim          | Date |
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| Claim          | Date |
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If more than 150 claims or 10 actions  
staple additional sheet here

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